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FOR CALENE	AR YEAR 19 or fiscal year beginning, 19 and	ending			<u> </u>	19		⑥	
rint or	Name of estate or trust	1				Decedent's so	cial security	number	
Type	1	Check	5a	☐ Estate		1	.1	L	
',	Name and title of fiduciary] if			Ente	Trust's or Est	ate's federal i	D. number	
-	2		5b	Trust					
	Address of fiduciary - number and street or rural route			Fo	r DOR	use only			
	3								
	City, town or post office State ZIP code								
	4	(8)							
Check	6 Amended return Decedent's estate Simple trust	1							
Applicable	☐ Bankruptcy estate ☐ Complex trust ☐ Final return ☐ Grantor trust ☐ Charitable Remainder Trust								
Box(es)	-	®				7 1			
Income and	7 Federal taxable income from federal Form 1041 - attach copy of Form 1041	***************	•••••	************	••••••			+	
Additions to	8 Additions to federal taxable income: a. Federal distribution to beneficiaries	8a			1				
income					 -				
	b. Federal estate tax deduction				ĺ				
	c. Federal exemptiond. Arizona income from other fiduciaries	······			\vdash				
	e. State or municipal bond interest other than Arizona	8e							
	f. Other additions to federal taxable income - attach schedule	اعما	-						
	9 Total Additions - add lines 8a through 8f					9			
	10 Total - add lines 7 and 9					10			
Subtractions	11 Subtractions from federal taxable income:			····					
From Income	a. Interest received on U.S. obligations	11a							
	b. Federal income from other fiduciaries	11b			<u> </u>				
	c. Arizona estate tax deduction				ļ				
	d. Arizona distribution to resident and nonresident beneficiaries				_				
\$7	e. Other subtractions from federal taxable income - attach schedule								
	12 Total Subtractions - add lines 11a through 11e					12			
Arizona Net	13 Arizona adjusted gross income - subtract line 12 from line 10					13			
Income Tax	14 Less exemption: \$1,000 for estate; \$100 for a trust					15			
computation	15 Arizona taxable income - subtract line 14 from line 13						***		
	17 Credit for taxes paid to other states or countries - see instructions.								
	18 Balance of tax - subtract line 17 from line 16, enter total - if line 17 is more than line		17						
B	19 Arizona estimated tax payments			••••••••••					
Payments	20 Payment with extension	20							
	21 Payment with original return (if amending) plus all payments after it was filed	21							
	22 Total payments - add lines 19 through 21	22							
	23 Refund from original return (if amending)	23							
	24 Balance of Payments - subtract line 23 from line 22					24			
Balance Due	25 Balance Due - subtract line 24 from line 18, if line 18 is more than line 24	•				25			
or	26 Retund Due - subtract line 18 from line 24, if line 24 is more than line 18					26			
Overpayment	27 Amount of line 26 to be applied to your 1993 estimated tax - see instructions page	6				DOR USE			
						DOR USE	8)		
							<u>-</u> -		
	NOTE: BE SURE TO COMPLETE THE QUESTION	IS ON PAG	E 2						
	DO NOT ATTACH REQUESTS FOR INCOME TAX CERTIFI	CATES TO	THIS	FORM.					
Please	DECLARATION (See General in	structions)	 				_	
Sign Here	· · · · · · · · · · · · · · · · · · ·								
· ·	I declare under the penalties of perjury that this return (including any accompanying schedules and statement(s))								
A. Per	has been examined by me, and to the best of my knowledge and belief, is a true, corre		•		nont		Dota		
·-	Signature of fiduciary or officer representing fiduciary Date Signature	e of person oth	er man 1	axpayer or a	Jen pre	haring terum	Pare		
	Address of Schools are officer	nde EIN e- CO		Name of the	n 02 00	ployer, if any		<u> </u>	
	Address of fiduciary or officer Prepare	er's EIN or SSì	•	THAIRE OF IN	ıı ut en	фюует, и апту			
				ļ. <u></u>					

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Check if this return is for a short taxable year Have Arizona income tax returns been filed for the If no, explain

1 Check it this return is for a short taxable year						
Have Arizona income tax returns been filed for the four (4) years preceding date of death						
f no, explain						
Date of decedent's death or date trust established. Month	Day	Year	_			
Was a Fiduciary return filed the preceding year?		Yes 🖂	No			
If copy of will or trust and statement required under General Instructions	have been previously furnished	, state when and where filed:				
Check whether this return was prepared on the cash or accrual ba	sis.					
Has the federal government made an additional assessment on the incor If yes, submit a detailed report with this return.	ne of this estate in the last 4 ye	ars? Yes []	No			
If return is for a trust, state name and address of grantor:						
			·			
	***	<u>L</u>				